| FORM | RV-6 |
|-------------|-------|
| (RFV · | 1997) |

STATE OF HAWAII — DEPARTMENT OF TAXATION

-AMENDED-

RENTAL MOTOR VEHICLE AND TOUR VEHICLE SURCHARGE TAX **ANNUAL RETURN & RECONCILIATION** FOR CALENDAR YEAR 19

OR FISCAL YEAR ENDING \overline{I} M

| 10 | DAY | Υ |
|----|-----|---|
| | | |

| С | DAY | YF |
|---|-----|----|

| DO NOT WRITE | IN THIS AREA | 77 |
|--------------|--------------|----|
| | | |

NAME: ___

R.V. IDENTIFICATION NO. ______

THIS FORM SHOULD BE USED ONLY AFTER THE ORIGINAL RETURN HAS BEEN FILED AND WITHIN THREE YEARS OF THE DUE DATE OR FILING DATE OF THE ORIGINAL ANNUAL RETURN, WHICHEVER IS LATER.

| | | | COLUMN A | | | COLUMI | N B | COLUMN C | | 1 |
|----------------------|---|---|--|----|--------------------------|---|-----|----------|-----|----------|
| • | | | Rental Motor Vehicle Surcharge Tax — Enter the Number of Rental Motor Vehicle Days Tour Vehicle Surcharge Enter the Number of Tour Vehicles Carrying 8 - 2 Passengers | | er of Tour ing 8 - 25 | Tour Vehicle Surcharge Tax Enter the Number of Tour Vehicles Carrying 26 or More Passengers | | | | |
| HERE | 1 | OAHU DISTRICT | | | | | | | | 1 |
| ERL | 2 | MAUI DISTRICT | | | | | | | | 2 |
| ORDER | 3 | HAWAII DISTRICT | | | | | | | | 3 |
| ONEY | 4 | KAUAI DISTRICT | | | | | | | | 4 |
| OR MONEY | 5 | TOTALS (Add lines 1 thru 4 of columns A, B, and C) | | | | | | | | 5 |
| | 6 | RATES | \$2 | | \$15 | | | \$65 | | 6 |
| CHECK | 7 | TAXES (Multiply line 5 by line 6 of columns A, B, and C) | | 00 | | | 00 | | 00 | 7 |
| TTACH C | 8 | | | | | | | | 8 | |
| ř | 9 | PENALTY | | | | | | 9 | | |
| A | 10 | INTEREST | | | | | | | | 10 |
| • | 11 | TOTAL AMOUNT DUE (ADD LINES 8, 9, AND | 10; ENTER AMOUNT HERE) | | | | | | | 11 |
| | 12 | TOTAL TAXES PAID ON MONTHLY, QUARTERLY, OR SEM | | | 12 | | | | | 12 |
| L | 13 | ADDITIONAL ASSESSMENTS PAID FOR THE | | | 13 | | | | | 13 |
| ļ | 14 | PENALTIES \$ INTEREST \$ | PAID DURINGTHE PERIO | | 14 | | | | | 14 |
| ŀ | <u> 15</u> | TOTAL PAYMENTS MADE (ADD LINES 12, 13, | | | 15 | | | | | 15 |
| ŀ | <u>16</u> | | | | 16 | | | | | 16 17 |
| ŀ | <u>17</u> | | | | | | | + | 18 | |
| - | <u>18</u> | | IE 17 IS LARGER THAN LINE 11, ENTER CREDIT TO BE REFUNDED (LINE 17 MINUS LINE 11) IE 11 IS LARGER THAN LINE 17, ENTER TAXES DUE (LINE 11 MINUS LINE 17) | | | | | | +- | 19 |
| - | 19 | | TAXES DUE (LINE TI MINUS I | | | enalty — | | | _ | 20a |
| FOR LATE FILING ONLY | | | _ | | terest | | | + | 20b | |
| ŀ | 21 TOTAL TAXES NOW DUE AND PAYABLE (ADD LINES 19, 20a AND 20b) | | | | | + | 21 | | | |
| ŀ | <u></u> 22 | PLEASE ENTER AMOUNT OF YOUR PAYMENT (PAY IN U.S. DOLLARS ONLY DRAWN ON ANY U.S.BANK.) | | | | † | 22 | | | |
| L | Make check payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any U.S. bank. Write your rental motor vehicle and tour vehicle | | | | | | | | | |

Make check payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any U.S. bank. Write your rental motor vehicle and tour vehicle registration number and the period of payment on the check.

| I declare, under the penalties accordance with the provisions thereunder. | set forth in section of the Rental Motor | 231-36, HRS, Vehicle and To | that this is a true and our Vehicle Surcharge | d correct return, p Tax Law and the r | orepared in ules issued |
|---|--|--------------------------------|--|--|----------------------------|
| | | | | | |

IN THE CASE OF A CORPORATION OR PARTNERSHIP, THIS RETURN MUST BE SIGNED BY AN OFFICER, PARTNER OR MEMBER, OR DULY AUTHORIZED AGENT.

SIGNATURE TITLE DATE

-MAILING ADDRESSES-

Oahu District Office P. O. Box 2430 Honolulu, HI 96804-2430

Maui District Office Hawaii District Office P. O. Box 1427 P. O. Box 937 Wailuku, HI 96793-6427 Hilo, HI 96721-0937

Kauai District Office P. O. Box 1687 Lihue, HI 96766-5687

FORM RV-6 (REV. 1997)

| RECONCILIATION OF PAYMENT OF TAXES | | | | | |
|--|------------|-------------|----------------|--|--|
| PAYMENT OF TAXES BY MONTHS IF MONTHLY RETURNS WERE FILED, QUARTERS IF QUARTERLY RETURNS WERE FILED, OR SEMIANNUAL PERIODS IF SEMIANNUAL RETURNS WERE FILED. ALSO ENTER THE PAYMENT MADE WITH THE ANNUAL RETURN, IF APPLICABLE. | | | | | |
| JAN \$ | APR \$ | JUL \$ | OCT \$ | | |
| FEB \$ | | AUG \$ | NOV \$ | | |
| MAR \$ | JUN \$ | SEP \$ | DEC \$ | | |
| 1st QTR \$ | 2nd QTR \$ | 3rd QTR \$ | 4th QTR \$ | | |
| | | | | | |
| 1st SEMIANNUAL PERI | OD \$ | 2nd SEMIANN | IUAL PERIOD \$ | | |
| ANNUAL \$ | | | | | |